

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEW MEXICO

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Z.H. Services, Inc., A New Mexico Corporation

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 27-5203551

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

4515 National Parks Hwy  
Carlsbad, NM 88220

Number, Street, City, State & ZIP Code

Eddy

County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor  
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other. Specify:

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.2111**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**☒ Chapter 7☐ Chapter 9☐ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☒ No☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

11. Why is the case filed in this district? Check all that apply:

☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

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12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_  
Number, Street, City, State & ZIP Code

**Is the property insured?**

☐ No

☐ Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

**Statistical and administrative information**

13. Debtor's estimation of available funds Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

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14. Estimated number of creditors

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

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15. Estimated Assets

<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

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16. Estimated liabilities

<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 26, 2021**  
MM / DD / YYYY

**X /s/ Ezequiel E. "Zeke" Hernandez**  
Signature of authorized representative of debtor

**Ezequiel E. "Zeke" Hernandez**  
Printed name

Title **Owner**

**18. Signature of attorney**

**X /s/ Christopher M. Gatton**  
Signature of attorney for debtor

Date **January 26, 2021**  
MM / DD / YYYY

**Christopher M. Gatton**  
Printed name

**GIDDENS & GATTON LAW, P.C.**  
Firm name

**10400 Academy N.E. Suite 350**  
**Albuquerque, NM 87111**  
Number, Street, City, State & ZIP Code

Contact phone **(505)271-1053** Email address **giddens@giddenslaw.com**

**138226 NM**  
Bar number and State

**Fill in this information to identify the case:**

Debtor name **Z.H. Services, Inc., A New Mexico Corporation**

United States Bankruptcy Court for the: DISTRICT OF NEW MEXICO

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☒ Other document that requires a declaration **Statement of Financial Affairs**

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 26, 2021**

**X /s/ Ezequiel E. "Zeke" Hernandez**

Signature of individual signing on behalf of debtor

**Ezequiel E. "Zeke" Hernandez**

Printed name

**Owner**

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **Z.H. Services, Inc., A New Mexico Corporation**United States Bankruptcy Court for the: **DISTRICT OF NEW MEXICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>1,800,000.00</b>
<b>1b. Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>0.00</b>
<b>1c. Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>1,800,000.00</b>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>1,727,362.14</b>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>400,000.00</b>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>2,395,953.14</b>
<b>4. Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <b>4,523,315.28</b>

**Fill in this information to identify the case:**Debtor name **Z.H. Services, Inc., A New Mexico Corporation**United States Bankruptcy Court for the: DISTRICT OF NEW MEXICO

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☒ No. Go to Part 2.  
☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.

Debtor **Z.H. Services, Inc., A New Mexico Corporation**  
Name

Case number (If known) \_\_\_\_\_

☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.  
☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☒ No. Go to Part 9.  
☐ Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

**Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

55.1.

**4515 National Parks Hwy**

**Nature and extent of debtor's interest in property**

**Fee Simple**

**Net book value of debtor's interest (Where available)**

**\$2,000,000.00**

**Valuation method used for current value**

**Comparable sale**

**Current value of debtor's interest**

**\$1,800,000.00**

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

**\$1,800,000.00**

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No  
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.



Debtor **Z.H. Services, Inc., A New Mexico Corporation**  
Name

Case number *(If known)* \_\_\_\_\_

- ☒ No. Go to Part 12.
- ☐ Yes Fill in the information below.

Debtor **Z.H. Services, Inc., A New Mexico Corporation**  
Name

Case number (If known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<div><u>\$1,800,000.00</u></div>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<div><u>\$0.00</u></div>	+ 91b. <div><u>\$1,800,000.00</u></div>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<div><u>\$1,800,000.00</u></div>

**Fill in this information to identify the case:**Debtor name **Z.H. Services, Inc., A New Mexico Corporation**United States Bankruptcy Court for the: **DISTRICT OF NEW MEXICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
<b>2.1</b>	<b>Carlsbad National Bank</b> Creditor's Name <b>202 W Stevens</b> <b>PO Box 1359</b> <b>Carlsbad, NM 88220</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred  Last 4 digits of account number <b>4912</b> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>4515 National Parks Hwy</b>  Describe the lien <b>Mortgage</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,727,362.14</b> <b>\$1,800,000.00</b>

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$1,727,362.14**  
**4****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Fill in this information to identify the case:**Debtor name **Z.H. Services, Inc., A New Mexico Corporation**United States Bankruptcy Court for the: **DISTRICT OF NEW MEXICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>IRS 4041 N. Central Ave., Ste 112 Phoenix, AZ 85012-5000</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Z.H. Services, Inc., A New Mexico Corporation**  
Name

Case number (if known)

2.3	Priority creditor's name and mailing address <b>New Mexico Dept. of Taxation &amp; Revenue PO Box 2527 Santa Fe, NM 87504</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$400,000.00</b>	<b>\$0.00</b>
Date or dates debt was incurred <b>2018-2019</b>		Basis for the claim: <b>taxes</b>		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>A. N. Etz PO Nox 5102 Hobbs, NM 88241</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,686.50</b>
3.2	Nonpriority creditor's name and mailing address <b>Beeman Accounting, LLC 122 N Canyon St Carlsbad, NM 88220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,949.55</b>
3.3	Nonpriority creditor's name and mailing address <b>Blue Cross and Blue Shield of NM P. O. Box 650615 Dallas, TX 75265</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>4004</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,137.76</b>
3.4	Nonpriority creditor's name and mailing address <b>Brainstool Equipment Sales, Inc. 502 Center Ave Carlsbad, NM 88220</b> Date(s) debt was incurred <u>01/08/2021</u> Last 4 digits of account number <u>0004</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Civil Lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,789.54</b>
3.5	Nonpriority creditor's name and mailing address <b>Brewer Oil Co 2701 Candelaria Rd NE Albuquerque, NM 87107</b> Date(s) debt was incurred <u>09/30/2017</u> Last 4 digits of account number <u>0504</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Civil Lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$368,525.17</b>

3.6	Nonpriority creditor's name and mailing address <b>EZ Rental &amp; Sales, Inc</b> <b>PO Box 1531</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$892.38</b>
3.7	Nonpriority creditor's name and mailing address <b>Forrest tire Carlsbad</b> <b>PO Box 1778</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>4451</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,015.14</b>
3.8	Nonpriority creditor's name and mailing address <b>G2</b> <b>PO Box 1227</b> <b>Jal, NM 88252</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$18,398.25</b>
3.9	Nonpriority creditor's name and mailing address <b>Get-A-Grip</b> <b>PO Vox 3973</b> <b>Hobbs, NM 88241</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,974.78</b>
3.10	Nonpriority creditor's name and mailing address <b>Hughes Services</b> <b>PO Box 68</b> <b>Loco Hills, NM 88255</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,570.00</b>
3.11	Nonpriority creditor's name and mailing address <b>Iesha Sharee Sanders</b> <b>c/o Michael K. Dean</b> <b>101 Summit Avenue, Suite 705</b> <b>Fort Worth, TX 76102</b> Date(s) debt was incurred <b>02/21/2020</b> Last 4 digits of account number <b>816K</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <b>Civil Lawsuit</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.12	Nonpriority creditor's name and mailing address <b>Mark Aguilar</b> <b>c/o Altura Law Firm- Andrew Indahl</b> <b>500 Marquestte Dr., NW, Suite 1200</b> <b>Albuquerque, NM 87102</b> Date(s) debt was incurred <b>01/2020</b> Last 4 digits of account number <b>0068</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <b>Civil Lawsuit</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>

3.13	Nonpriority creditor's name and mailing address <b>Marlin</b> <b>PO Box 13604</b> <b>Philadelphia, PA 19101-3604</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>5899</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,364.18</b>
3.14	Nonpriority creditor's name and mailing address <b>Master Lube</b> <b>1221 W Peirce</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$550.06</b>
3.15	Nonpriority creditor's name and mailing address <b>MESQUITE SWD INC</b> <b>1533 Arbor Ct</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>1260</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,600.00</b>
3.16	Nonpriority creditor's name and mailing address <b>NAPA Auto Parts</b> <b>710 S. Canyon</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,913.35</b>
3.17	Nonpriority creditor's name and mailing address <b>Nichols</b> <b>PO Box 608</b> <b>Carlsbad, NM 88221</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2111</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,234.47</b>
3.18	Nonpriority creditor's name and mailing address <b>NM Mutual</b> <b>PO Box 27805</b> <b>Albuquerque, NM 87125</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2782</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,722.26</b>
3.19	Nonpriority creditor's name and mailing address <b>PA Prospect</b> <b>PO Box 785</b> <b>Columbus, MT 59019</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$570.00</b>

3.20	Nonpriority creditor's name and mailing address <b>Paccar Financial Corp</b> <b>c/o Walker &amp; Associates, P.C. -S. Roybal</b> <b>500 Marquestte N.W., Suite 650</b> <b>Albuquerque, NM 87102</b> Date(s) debt was incurred <b>10-21-2019</b> Last 4 digits of account number <b>0573</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <b>Civil Lawsuit</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,664,354.65</b>
3.21	Nonpriority creditor's name and mailing address <b>R M S</b> <b>PO Box 19646</b> <b>Minneapolis, MN 55419</b> Date(s) debt was incurred Last 4 digits of account number <b>4563</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,003.55</b>
3.22	Nonpriority creditor's name and mailing address <b>Roosevelt County Electric</b> <b>PO Box 389</b> <b>Portales, NM 88130</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Utility Bill</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$620.10</b>
3.23	Nonpriority creditor's name and mailing address <b>Sanders</b> <b>408 S. Roosevelt Road</b> <b>NM 88320</b> Date(s) debt was incurred Last 4 digits of account number <b>1693</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,055.46</b>
3.24	Nonpriority creditor's name and mailing address <b>Sandpoint</b> <b>410 E. Derrick Rd.</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$96.13</b>
3.25	Nonpriority creditor's name and mailing address <b>Shearer Testing</b> <b>PO Box 217</b> <b>Portales, NM 88130</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$656.00</b>
3.26	Nonpriority creditor's name and mailing address <b>Sparks</b> <b>301 N. Canal</b> <b>Carlsbad, NM 88220</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,178.41</b>



Debtor **Z.H. Services, Inc., A New Mexico Corporation**  
Name

Case number (if known)

3.27 Nonpriority creditor's name and mailing address

**Superior  
PO Box 1057  
Loveland, CO 80539**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

**\$390.00**

3.28 Nonpriority creditor's name and mailing address

**T Over Ranch  
PO Box 160  
Eunice, NM 88231**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

**\$9,200.00**

3.29 Nonpriority creditor's name and mailing address

**Woods  
4801 Bulter Ave.  
Farmington, NM 87401**

Date(s) debt was incurred

Last 4 digits of account number **4455**

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

**\$200,505.45**

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Graystone Partners, LLC 5151 N Oracle Rd, Suite 209 Tucson, AZ 85704</b>	Line <b>3.15</b> <input type="checkbox"/> Not listed. Explain	—
4.2	<b>Moses, Dunn, Farmer &amp; Tuthill, P.C. Karla K. Poe PO Box 27047 Albuquerque, NM 87125-7047</b>	Line <b>3.5</b> <input type="checkbox"/> Not listed. Explain	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>400,000.00</b>
5b. +	\$ <b>2,395,953.14</b>
5c.	\$ <b>2,795,953.14</b>

**Fill in this information to identify the case:**

Debtor name **Z.H. Services, Inc., A New Mexico Corporation**

United States Bankruptcy Court for the: DISTRICT OF NEW MEXICO

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206G**

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

*Property*

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name **Z.H. Services, Inc., A New Mexico Corporation**United States Bankruptcy Court for the: **DISTRICT OF NEW MEXICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1	<b>Dairy Farmers of America, Inc.</b>	<b>c/o Baker Botts L.L.P. - Thomas E. O'Bri 2001 Ross Avenue, Suite 900 Dallas, TX 75201-2950</b>	<b>Iesha Sharee Sanders</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <b>3.11</b> <input type="checkbox"/> G _____
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2.2	<b>Ezequiel E. "Zeke" Hernandez</b>	<b>214 N. Main Carlsbad, NM 88220</b>	<b>Paccar Financial Corp</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <b>3.20</b> <input type="checkbox"/> G _____
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2.3	<b>Gabriel Matthew Lopez</b>	<b>c/o Michael K. Dean 101 Summit Ave., Suite 705 Fort Worth, TX 76102</b>	<b>Iesha Sharee Sanders</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <b>3.11</b> <input type="checkbox"/> G _____
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2.4	<b>Joel Longoria</b>	<b>1911 Sentry Circle Carlsbad, NM 88220</b>	<b>Brewer Oil Co</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <b>3.5</b> <input type="checkbox"/> G _____
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2.5	<b>Zeke Michael Hernandez</b>	<b>1402 DOEPP DRIVE Carlsbad, NM 88220</b>	<b>Brewer Oil Co</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <b>3.5</b> <input type="checkbox"/> G _____
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Debtor   **Z.H. Services, Inc., A New Mexico Corporation**  

Case number *(if known)* \_\_\_\_\_

<b>Additional Page to List More Codebtors</b>	
<b>Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.</b>	
<i>Column 1: Codebtor</i>	<i>Column 2: Creditor</i>

**Fill in this information to identify the case:**Debtor name Z.H. Services, Inc., A New Mexico CorporationUnited States Bankruptcy Court for the: DISTRICT OF NEW MEXICO

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2021 to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other \_\_\_\_\_**Gross revenue**

(before deductions and exclusions)

\$0.00**For prior year:**From 1/01/2020 to 12/31/2020☒ Operating a business☐ Other \_\_\_\_\_\$1,900,000.00**For year before that:**From 1/01/2019 to 12/31/2019☒ Operating a business☐ Other \_\_\_\_\_\$8,432,558.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from****each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**

Check all that apply

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Jimmy and Angie Vasquez  none	12/17/2020	\$216,000.00	purchase of 183 NM -267, Portales, NM 88130

#### 5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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#### 6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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### Part 3: Legal Actions or Assignments

#### 7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Mark Aguilar v. ZH Services, Inc. D-503-CV-2020-00068	Civil	Fifth Judicial District Court 102 North Canal Carlsbad, NM 88220	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Brewer Oil Co., a New Mexico corporation v. Z.H. Services, Incorporated, a New Mexico corporation, et. al. D-503-CV-2020-00504	Contract/Debt & Money Due	Fifth Judicial District Court 102 North Canal Carlsbad, NM 88220	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Paccar Financial Corp. v. ZH Services, Inc. and Ezequiel Hernandez D-503-CV-2020-00573	Debt and Money Due	Fifth Judicial District Court 102 North Canal Carlsbad, NM 88220	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.4.	<b>Brainstool Equipment Sales, Inc.</b>  <b>v.</b>  <b>ZH Services, Inc.</b> <b>M-17-CV-2021-00004</b>	<b>Civil</b>	<b>Eddy County Magistrate Court</b> <b>1949 S. Canal Street</b> <b>Carlsbad, NM 88220</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>GIDDENS &amp; GATTON LAW, P.C.</b> <b>10400 Academy N.E. Suite 350</b> <b>Albuquerque, NM 87111</b>	<b>Attorney Fees</b>	<b>08/05/2020;</b> <b>01/26/2021</b>	<b>\$4,087.90</b>
	Email or website address <b>giddens@giddenslaw.com</b>			
	Who made the payment, if not debtor? <b>Joel and Melanie Longoria</b>			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
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**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

☐ No.

☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

☐ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**



**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<b>Wells Fargo Bank 115 W. Fox St Carlsbad, NM 88220</b>	<b>XXXX-9219</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>07/23/2020</b>	<b>\$0.00</b>
18.2.	<b>Wells Fargo Bank 115 W. Fox St Carlsbad, NM 88220</b>	<b>XXXX-2417</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>08/03/2020</b>	<b>\$0.00</b>
18.3.	<b>Wells Fargo Bank 115 W. Fox St Carlsbad, NM 88220</b>	<b>XXXX-7990</b>	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>05/29/2020</b>	<b>\$0.00</b>
18.4.	<b>Wells Fargo Bank 115 W. Fox St Carlsbad, NM 88220</b>	<b>XXXX-4677</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>07/24/2020</b>	<b>\$0.00</b>
18.5.	<b>Carlsbad National Bank 202 W Stevens PO Box 1359 Carlsbad, NM 88220</b>	<b>XXXX-7703</b>	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>08/3/2020</b>	<b>\$97.98</b>
18.6.	<b>Carlsbad National Bank 202 W Stevens PO Box 1359 Carlsbad, NM 88220</b>	<b>XXXX-7711</b>	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>08/03/2020</b>	<b>\$200.32</b>
18.7.	<b>Carlsbad National Bank 202 W Stevens PO Box 1359 Carlsbad, NM 88220</b>	<b>XXXX-3466</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>04/10/2020</b>	<b>\$0.00</b>

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.8.	<b>Carlsbad National Bank</b> <b>202 W Stevens</b> <b>PO Box 1359</b> <b>Carlsbad, NM 88220</b>	<b>XXXX-3474</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ____	<b>04/10/2020</b>	<b>\$0.00</b>

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

☒ No.

☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		<b>Dates business existed</b>
25.1. <b>ZH Services, Inc</b> <b>4515 National Parks Hwy</b> <b>Carlsbad, NM 88220</b>		<b>EIN: 27-5203551</b>  <b>From-To 01/14/2011 - 07/17/2020</b>

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. <b>Beeman Accounting, LLC</b> <b>122 N Canyon St</b> <b>Carlsbad, NM 88220</b>	<b>2016-2020</b>
26a.2. <b>Jones &amp; Kluesner</b> <b>209 W McKay St</b> <b>Carlsbad, NM 88220</b>	<b>2010-2016</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <b>Zeke Michael Hernandez</b> <b>1402 DOEPP DRIVE</b> <b>Carlsbad, NM 88220</b>	<b>Records have allegedly been destroyed</b>
26c.2. <b>Robin Rendino</b> <b>922 Sandia</b> <b>Carlsbad, NM 88220</b>	<b>Records have allegedly been destroyed</b>

Name and address		If any books of account and records are unavailable, explain why
26c.3.	<b>Edward Granger</b> <b>1611 Westridge</b> <b>Carlsbad, NM 88220</b>	<b>Records have allegedly been destroyed</b>
26c.4.	<b>Kelly Granger</b> <b>1611 Westridge</b> <b>Carlsbad, NM 88220</b>	<b>Records have allegedly been destroyed</b>

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address	
26d.1.	<b>Carlsbad National Bank</b> <b>202 W Stevens</b> <b>PO Box 1359</b> <b>Carlsbad, NM 88220</b>
26d.2.	<b>First American Bank</b> <b>303 West Main Street</b> <b>Artesia, NM 88210</b>
26d.3.	<b>Ally</b> <b>PO Box 380902</b> <b>Minneapolis, MN 55438</b>
26d.4.	<b>FORD MOTOR CREDIT CO LLC</b> <b>P.O. Box 790119</b> <b>Saint Louis, MO 63179-0119</b>
26d.5.	<b>Paccar Financial Corp</b> <b>c/o Walker &amp; Associates, P.C. -S. Roybal</b> <b>500 Marquestte N.W., Suite 650</b> <b>Albuquerque, NM 87102</b>
26d.6.	<b>MHC</b>
26d.7.	<b>AMUR</b>

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
- ☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Edward Granger</b>	<b>1611 Westridge</b> <b>Carlsbad, NM 88220</b>	<b>COO</b>	

Name	Address	Position and nature of any interest	% of interest, if any
Kelly Granger	1611 Westridge Carlsbad, NM 88220	Bookkeeper/Office Manager	
Name	Address	Position and nature of any interest	% of interest, if any
Zeke Michael Hernandez	1402 DOEPP DRIVE Carlsbad, NM 88220	Vice-President	
Name	Address	Position and nature of any interest	% of interest, if any
Robin Rendino	922 Sandia Carlsbad, NM 88220	Secretary	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No  
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Ezequiel E. "Zeke" Hernandez	214 N. Main Carlsbad, NM 88220	President	

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
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**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 26, 2021**

/s/ Ezequiel E. "Zeke" Hernandez  
Signature of individual signing on behalf of the debtor

Ezequiel E. "Zeke" Hernandez  
Printed name

Position or relationship to debtor **Owner**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes